plan of care for each applicant or beneficiary.

- (b) The plan of care must include—
- (1) Diagnoses, symptoms, complaints, and complications indicating the need for admission:
- (2) A description of the functional level of the individual:
 - (3) Objectives;
 - (4) Any orders for—
 - (i) Medications;
 - (ii) Treatments:
- (iii) Restorative and rehabilitative services:
 - (iv) Activities:
 - (v) Therapies;
 - (vi) Social services;
 - (vii) Diet; and
- (viii) Special procedures recommended for the health and safety of the patient;
- (5) Plans for continuing care, including review and modification to the plan of care; and
 - (6) Plans for discharge.
- (c) The attending or staff physician and other personnel involved in the beneficiary's care must review each plan of care at least every 90 days.

§ 456.181 Reports of evaluations and plans of care.

A written report of each evaluation and plan of care must be entered in the applicant's or beneficiary's record—

- (a) At the time of admission; or
- (b) If the individual is already in the facility, immediately upon completion of the evaluation or plan.

UTILIZATION REVIEW (UR) PLAN: GENERAL REQUIREMENTS

§ 456.200 Scope.

Sections 456.201 through 456.245 of this subpart prescribe requirements for a written utilization review (UR) plan for each mental hospital providing Medicaid services. Sections 456.205 and 456.206 prescribe administrative requirements; §§ 456.211 through 456.213 prescribe informational requirements; §§ 456.231 through 456.238 prescribe requirements for continued stay review; and §§ 456.241 through 456.245 prescribe requirements for medical care evaluation studies.

§ 456.201 UR plan required for inpatient mental hospital services.

- (a) The State plan must provide that each mental hospital furnishing inpatient services under the plan has in effect a written UR plan that provides for review of each beneficiary's need for the services that the mental hospital furnishes him.
- (b) Each written mental hospital UR plan must meet the requirements under §§ 456.201 through 456.245.

UR PLAN: ADMINISTRATIVE REQUIREMENTS

§ 456.205 UR committee required.

The UR plan must—

- (a) Provide for a committee to perform UR required under this subpart;
- (b) Describe the organization, composition, and functions of this committee: and
- (c) Specify the frequency of meetings of the committee.

§ 456.206 Organization and composition of UR committee; disqualification from UR committee membership.

- (a) For the purpose of this subpart, "UR committee" includes any group organized under paragraphs (b) and (c) of this section.
- (b) The UR committee must be composed of two or more physicians, one of whom is knowledgeable in the diagnosis and treatment of mental diseases, and assisted by other professional personnel.
- (c) The UR committee must be constituted as— $\,$
- (1) A committee of the mental hospital staff;
- (2) A group outside the mental hospital staff, established by the local medical or osteopathic society and at least some of the hospitals and SNFs in the locality; or
- (3) A group capable of performing utilization review, established and organized in a manner approved by the Secretary.
- (d) The UR committee may not include any individual who—
- (1) Is directly responsible for the care of patients whose care is being reviewed: or